

BOOKING FORM

PROPERTY NAME \_\_\_\_\_

HOLIDAY DATES FROM \_\_\_\_\_ TO \_\_\_\_\_

RENTAL - WEEK 1 £ \_\_\_\_\_

WEEK 2 £ \_\_\_\_\_

WEEK 3 £ \_\_\_\_\_

SECURITY DEPOSIT £ 250

TOTAL £ \_\_\_\_\_

Deposit 25% £ \_\_\_\_\_

BALANCE £ \_\_\_\_\_

Full amount if under 8 weeks. Please tick box if cot required

CLIENTS NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

TELEPHONE (daytime) \_\_\_\_\_ (evening) \_\_\_\_\_

MAXIMUM NUMBER OF PEOPLE IN PARTY \_\_\_\_\_

CHILDREN'S AGES \_\_\_\_\_

I AGREE TO ABIDE BY THE BOOKING CONDITIONS OVERLEAF

SIGNATURE \_\_\_\_\_